

# **Exhibit A**

IN THE UNITED STATES DISTRICT COURT  
FOR THE EASTERN DISTRICT OF VIRGINIA  
Richmond Division

THERABODY, INC.,	)	
	)	
Plaintiff,	)	
	)	
v.	)	Civil Action No. 3:23cv545 (RCY)
	)	
DAVID C. WALTON,	)	
	)	
Defendant.	)	
_____	)	

**DECLARATION OF \_\_\_\_\_**  
**UNDER AGREED PROTECTIVE ORDER**

I, , being duly sworn, declare as follows:

1. My address is \_\_\_\_\_.
2. My present employer is \_\_\_\_\_.
3. My present occupation/job description is \_\_\_\_\_.

4. I hereby acknowledge that (i) I have been given a copy of the Agreed Protective Order (“Protective Order”) in the above-referenced case; (ii) I carefully read the Protective Order; and (iii) I understand and am familiar with the terms of the Protective Order.

5. I will comply with all the provisions of the Protective Order. I will hold all Protected Discovery Materials disclosed to me, including the substance and any copy, summary abstract, excerpt, index, or description, in confidence, and will not disclose such material to anyone not qualified under the Protective Order. I will not use any Protected Discovery Material disclosed to me for any purposes other than this case.

6. Upon conclusion of this matter and all appeals, if any, of this litigation, I will return all Protected Discovery Material that comes into my possession and all documents and things that I have prepared relating thereto, to counsel for the party by whom I am retained or employed, or from

whom I have received such material, or in the alternative will verify in writing that such materials have been destroyed.

7. I hereby submit to the jurisdiction of the United States District Court for the Eastern District of Virginia for the purpose of enforcement of the Protective Order in this case.

I declare under penalty of perjury that the foregoing is true and correct.

---